

**ADDENDUM #1
TO SPEC. 04-099
THE ANNUAL REQUIREMENTS FOR
MEDICAL EQUIPMENT AND SUPPLIES FOR
LINCOLN/LANCASTER HEALTH DEPARTMENT**

Addendum #1 to Spec. 04-099 for The Annual Requirements for Medical supplies for Lincoln/Lancaster Health Department, bids to be opened on Wednesday, April 14, 2004 at 12:00 noon.

Please replace the Bid Schedule originally sent out with Specification 04-099 with the attached new **Bid Schedule**.

All other terms and conditions to remain unchanged.

Dated this 8th day of April, 2004.

Purchasing Department

Tom Kopplin
Assistant Purchasing Agent

**PROPOSAL
SPECIFICATION NO. 04-099**

BID OPENING TIME: 12:00 NOON

DATE: April 14, 2004

The undersigned bidder, having full knowledge of the requirements of the City of Lincoln and County of Lancaster for the below listed items and the contract documents (which include Notice to Bidders, Instructions to Bidders, this Proposal, Specifications, Contract, and any and all addenda) and all other conditions of the Proposal, agrees to sell to the City and the County the Below listed items for the performance of this Specification, complete in every respect, in strict accordance with the contract documents at and for unit prices listed below.

**THE REQUIREMENTS FOR:
HEALTH DEPARTMENT MEDICAL EQUIPMENT AND SUPPLIES**

<u>BIDDING SCHEDULE</u>			
<u>ITEM</u>	<u>ITEM DESCRIPTION</u>	<u>EACH</u>	<u>BULK PKG.</u>
1.	I.V. Equipment		
1.1	Butterfly- 25 gauge-per box, # per box_____	\$_____	\$_____
1.2	Butterfly- 23 gauge-per box, # per box_____	\$_____	\$_____
1.3	10 ml Luer lock Syringes-per box, # per box_____	\$_____	\$_____
1.4	5 ml Luer lock Syringes-per box, # per box_____	\$_____	\$_____
1.5	3 ml Luer lock Syringes-per box, # per box_____	\$_____	\$_____
1.6	3 ml Syringes with ½" 26 gauge needle-per box, # per box_____	\$_____	\$_____
1.7	Syringes with ½" 25 gauge needle-per box, # per box_____	\$_____	\$_____
1.8	Syringes with 1" 22 gauge needle-per box, # per box_____	\$_____	\$_____
1.9	Syringes with 1" 21 gauge needle per box, # per box_____	\$_____	\$_____
1.10	Alcohol prep Pads-per case, # of boxes per case_____	\$_____	\$_____
1.11	2 gal sharps container-per case, # of boxes per case_____	\$_____	\$_____
1.12	1 quart sharps container-per case, # of boxes per case_____	\$_____	\$_____
1.13	Cotton Balls-per case, # per case_____	\$_____	\$_____
1.14	Band-Aids 3/4" X 3"-per box, # per box_____	\$_____	\$_____
1.15	Band-Aids, Glitter Strip 3/4" X 3"-per box, # per box_____	\$_____	\$_____
1.16	Genie Lancets-per box, # per box_____	\$_____	\$_____
1.17	Multi-holder Needle Holder	\$_____	\$_____
1.18	Syringe/needle TB 1cc 26g, 3/8 inch safety glide	\$_____	\$_____
1.19	Syringe/needle TB 3cc 23g, 1 inch safety glide	\$_____	\$_____
1.20	Syringe/needle TB 3cc 25b, 5/8 inch safety glide	\$_____	\$_____
1.21	Needle, hypo 20g X 1	\$_____	\$_____

ITEM	ITEM DESCRIPTION	EACH	BULK PKG.
1.22	Needle, hypo 23g X 1	\$_____	\$_____
1.23	Needle, hypo 25g X 2	\$_____	\$_____
1.24	Needle, hypo 30g X 1	\$_____	\$_____
1.25	Needle, hypo sub Q 26g X 5/8	\$_____	\$_____
2. Diagnostic			
2.1	Glucose Test Strips-per box, # per box_____	\$_____	\$_____
2.2	Glucose Test Controls-per box, # per box_____	\$_____	\$_____
2.3	Cholesterol Test Strips-per box, # per box_____	\$_____	\$_____
2.4	Cholesterol Test Control-per box, # per box_____	\$_____	\$_____
2.5	Urine Control, KovaTrol I with urobil-per box, # per box_____	\$_____	\$_____
2.6	Dickson Temp. Recording Charts-Per box, # per box_____	\$_____	\$_____
2.7	Dickson Temp. Recording Pens-Per box, # per box_____	\$_____	\$_____
2.8	EKG Paper for Elite EK 10	\$_____	\$_____
2.9	EKG Mount Cards for Elite EK 10	\$_____	\$_____
2.10	Bayer 10 SG Urine Dipsticks N-Multi stix per bottle	\$_____	\$_____
2.11	Urine Cups, sterile with screw cap-per case, # per case_____	\$_____	\$_____
2.12	Urine Cups, non-sterile with screw cap-per case, # per case_____	\$_____	\$_____
2.13	Quidel Quick Vue Pregnancy Kit, HCG kit-Per box, # per box_____	\$_____	\$_____
2.14	Quidel HCG Kit Contol	\$_____	\$_____
2.15	Hemocue HCG Cuvettes	\$_____	\$_____
2.16	Hemocue HCG Control	\$_____	\$_____
2.17	Abbot Signify Strep A cassette	\$_____	\$_____
2.18	Eletrd Bio Tab- per case	\$_____	\$_____
2.19	Microscope Immersion Oil-per bottle, bottle size_____	\$_____	\$_____
2.20	Glass Slides, plain- per gross	\$_____	\$_____
2.21	Glass Slides, frosted- per gross	\$_____	\$_____

(Amended)

COMPANY NAME: _____

2.22	Cover sips, 22 X 22- per ounce	\$_____	\$_____
2.23	13 X 100 glass tubes(wet prep) per box	\$_____	\$_____
2.24	Transfer Pipettes 500 per box	\$_____	\$_____
3.	Supplies		
3.1	Sterile cotton tip, 6" 2 per pkg	\$_____	\$_____
3.2	Cotton Balls 2000/box	\$_____	\$_____
3.3	Adhesive flex Bandage 3/4" X 3" strips	\$_____	\$_____
3.4	4" ACE Bandage	\$_____	\$_____
3.5	Adhesive flex spot round bandage	\$_____	\$_____
3.6	#15 Surgical Blade	\$_____	\$_____
3.7	Tongue Blade Sr 5 3/4"	\$_____	\$_____
3.8	Digital Probe Covers 100/box	\$_____	\$_____
3.9	5 oz paper cups 100/sleeve	\$_____	\$_____
3.10	1 oz medicine cups 100/sleeve	\$_____	\$_____
3.11	Envirocide disinfectant per gallon	\$_____	\$_____
3.12	Dressing Release 2 X 3	\$_____	\$_____
3.13	Dressing Release 4 X 5	\$_____	\$_____
3.14	Gloves vinyl powder-free Large #_____ per box	\$_____	\$_____
3.15	Gloves vinyl powder-free Medium #_____ per box	\$_____	\$_____
3.16	Gloves vinyl powder-free Small #_____ per box	\$_____	\$_____
3.17	KY Jelly, 4oz tube	\$_____	\$_____
3.18	Table Paper 21 X 255, 12 rolls/case	\$_____	\$_____
3.19	Alcohol Prep pad 200/box	\$_____	\$_____
3.20	Scrub Alcohol foam 5.4 oz	\$_____	\$_____
3.21	2 ply sheet drape 40 X 48 (large exam)	\$_____	\$_____
3.22	Towel, prof dental 3 ply white 14 X 18	\$_____	\$_____
3.23	Uncull 3.5mm Trach tube	\$_____	\$_____
3.24	Medical Kleenex Wipe	\$_____	\$_____
3.25	Iodine per gallon	\$_____	\$_____
3.26	De-colorizer per gallon	\$_____	\$_____
3.27	Safranin per gallon	\$_____	\$_____
3.28	Crystal Violet Stain per gallon	\$_____	\$_____
3.29	Aloe-Gaurd Soap per gallon Active Ingredient Chlorxylene 0.50 % w/w	\$_____	\$_____
3.30	Serracult Occult Bld	\$_____	\$_____
3.31	Isopropyl Alcohol per case, # bottles/case_____	\$_____	\$_____

(Amended) COMPANY NAME: _____

3.32	Envirocide disinfectant per case	\$ _____	\$ _____
3.33	BKC towlette per case	\$ _____	\$ _____
3.34	Regular Kleenex per case	\$ _____	\$ _____
3.35	Safe-Skin small powder-free gloves per case # box per case _____	\$ _____	\$ _____
3.36	Safe-Skin small lt powder gloves per case # box per case _____	\$ _____	\$ _____
3.37	Safe-Skin extra-small lt powder gloves per case # box per case _____	\$ _____	\$ _____
3.38	3VRenata Batteries # CR2450N for an ACCU-CHEK	\$ _____	\$ _____
Total for Items Bid		\$ _____	\$ _____

BID SECURITY REQUIRED: Yes _____ Amount: _____
No XX

Special provisions for Commodity Term Contracts are included with the specification document. Bidders are urged to read the Special Provisions before completing the following sections of the Proposal.

Contract Extension Renewal is an option: Yes _____
No _____

TERM PRICE CLAUSE: BIDDER MUST STATE

- (a) Bid prices firm for the full contract period: _____; or
- (b) Bid prices subject to escalation/de-escalation: _____.
- (c) If (b), state period for which prices will remain firm:
Through _____.

INTERLOCAL PURCHASING: The City/County desires to make available to other local government entities of the State of Nebraska, by mutual agreement with the successful bidder, and properly authorized inter-local purchasing agreements, the right to purchase the same services, at the prices quoted, for the period of this contract. Each bidder shall indicated on the Bid Form in the space provided below if he/she will honor Political Subdivision orders in accordance with the contract terms and conditions, in addition to orders from City of Lincoln/Lancaster County.

_____ YES _____ NO

If "YES", Contract supplier or suppliers may honor pricing and extend the contract to political sub-divisions, cities and counties. Terms and conditions of the contract must be met by political sub-divisions, cities and counties. Under no circumstances shall the City of Lincoln/Lancaster County be contractually obligated or liable for any purchases by these political sub-divisions, cities or counties.

VENDOR SERVICES:

1. Supply with bid documents your full line Medical Supply catalog.
General Catalog discount offered _____%.
2. Supply with bid a separate listing of available latex-free products.
3. Toll-free telephone ordering number _____.
4. Does your company have customized internet ordering capability?
Describe: _____

5. Deliveries shall be pre-paid, shipped same-day direct to each ordering location.
Specify shipping method: _____
Delivery days _____ not to exceed three (3) calendar days.
6. **Shipping address is:**
Lincoln/Lancaster Health Department:
3140 N Street
Lincoln NE 68510

(Amended) COMPANY NAME: _____

COMPANY REPRESENTATIVE responsible for the administration of this Agreement:

NAME: _____
TITLE: _____
PHONE NO. _____

AFFIRMATIVE ACTION PROGRAM: Successful bidder will be required to comply with the provisions of the City's Affirmative Action Policy (Contract Compliance, Sec. 1.16). The Equal Opportunity Officer will determine compliance or non-compliance, upon a complete and substantial review of successful bidder's equal opportunity policies, procedures and practices.

The undersigned signatory for the bidder represents and warrants that he has full and complete authority to submit this proposal to the City, and to enter into a contract if this proposal is accepted.

**RETURN 2 COMPLETE COPIES OF PROPOSAL AND SUPPORTING MATERIAL.
MARK OUTSIDE OF BID ENVELOPE AS FOLLOWS:
SEALED BID FOR SPEC.04-099**

COMPANY NAME

BY (Signature)

STREET ADDRESS or P.O. BOX

(Print Name)

CITY, STATE ZIP CODE

(Title)

TELEPHONE

(Date)

EMPLOYER'S FEDERAL I.D. NO.
OR SOCIAL SECURITY NUMBER

Bids may be inspected in the Purchasing Division offices during normal business hours, after tabulation by the purchasing agent. If you desire a copy of the bid tabulation to be mailed to you, you must enclose a self-addressed stamped envelope with your bidding documents. Bid tabulations can also be viewed on our website at: <http://www.ci.lincoln.ne.us/city/finance/purch/specindx.htm>